

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10/577,228 FILING DATE

APPLICATION NO.

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		
	IND. DEP.		IND. DEP.		IND. DEP.			IND. DEP.		IND. DEP.		IND. DEP.		
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TOTAL REQ.	1		↓		↓				↓		↓		↓	
TOTAL DEP.	18	←		←		←			←		←		←	
TOTAL CLAIMS	19													

Best Available Copy